7/18/02

UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS

FEB 2 8 2008 aew 2-28-2008 MICHAEL W. DOBBINS

IN FORMA PAUPERIS APPLICATION

7	- <u> Clv/1</u> Pla	ES M WORTHEM	AND FINANCIAL AFFID	AVIT	
70 . (Ω , ⟨¢, ℂ,	DART, Salvador Godinez D. Chief of Police efendant(s)	08CV1210 JUDGE LEINENW MAGISTRATE JU		
more and p I, (otherwithed declarate continuous)	informa provide: TAM out full are that omplai	is included, please place an X into whichever ation than the space that is provided, attached the additional information. Please PRINT: E	ene or more pages that refer to each state that I am the Delaintiff Delaintif	etitioner Dimovant ation D to proceed I, or both. I also he relief sought in	
1.	I.D.	you currently incarcerated? # 2001-001905 Name of proportion receive any payment from the institute.	ison or jail: COOK COUNT	Jail	
2.	Are you currently employed? Monthly salary or wages: Name and address of employer:				
	a.	If the answer is "No": Date of last employment: 12010 Monthly salary or wages: 1200 Name and address of last employer: 13131	2 .		
	ъ.	Are you married?	s ØNo		

Apart from your income stated above in response to Question 2, in the past twelve months have you or anyone else living at the same address received more than \$200 from any of the following sources? Mark an X in either "Yes" or "No", and then check all boxes that apply in each category.

Spouse's monthly salary or wages: Name and address of employer:

a. Salary or wages		□Yes	ENO
Amount	Received by		

	b. ☐ Business, ☐ profession or ☐ other self-employment AmountReceived by	□Yes	ØNo.			
	c. ☐ Rent payments, ☐ interest or ☐ dividends Amount Received by	□Yes	ØΝο			
	d. ☐ Pensions, ☐ social security, ☐ annuities, ☐ life insurance, ☐ disability, ☐ workers' compensation, ☐ unemployment, ☐ welfare, ☐ alimony or maintenance or ☐ child support ☐ Yes ☐ No					
	Amount Received by	——————————————————————————————————————	₩			
	e.	□Yes	ØNo			
	f.) □Yes	XINo.			
4.	Do you or anyone else living at the same address have more than savings accounts? Yes No Total	amount:				
5.	Do you or anyone else living at the same address own any stocks financial instruments? Property: In whose name held: Relationship to you:	□Yes	μω			
6.	Do you or anyone else living at the same address own any real condominiums, cooperatives, two-flats, three-flats, etc.)? Address of property:	□Yes	×Νο			
,	Type of property: Current value:		· · · · · · · · · · · · · · · · · · ·			
	In whose name held: Relationship to you:					
	Amount of monthly mortgage or loan payments: Name of person making payments:					
7.	Do you or anyone else living at the same address own any automol homes or other items of personal property with a current market value					
	Property:					
	Current value:					
	Current value: In whose name held: Relationship to you:					
8.	List the persons who are dependent on you for support, state your relating indicate how much you contribute monthly to their support. If none, co Figure 17 18 of age Heather 12 18 of age Heather 18	heck here KINO	dependents diagram			

. MacFarlane



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TRANSACTION REPORT Print Date: 01/28/2008

Inmate Name:

SCOTT, DAVID

Balance:

\$0.05

Inmate Number: 20070071905

9/1/1972 Inmate DOB:

Stamp	Transaction	Amount	Balance
12/19/2007	ORDER DEBIT	-0.71	0.05
12/11/2007	ORDER DEBIT	-9.28	0.76
12/07/2007	CREDIT	10.00	10.04
11/16/2007	RETURN CREDIT	0.03	0.04
11/13/2007	ORDER DEBIT	-0.03	0.01
11/08/2007	RELEASE FUNDS	-10.00	0.04
10/31/2007	CREDIT	10.00	10.04
10/02/2007	ORDER DEBIT	-0.43	0.04
10/01/2007	RETURN CREDIT	0.28	0.47
09/25/2007	ORDER DEBIT	-9.81	0.19
09/24/2007	CREDIT	10.00	10.00

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